

College Station Parks & Recreation Department

2004 ADULT CO-ED VOLLEYBALL

SESSION 4

REGISTRATION: You can now register by mail! If mailed, your entry form must be postmarked by **September 23, 2004**. You may also register in person:



September 20 - 24, 2004
8:00 a.m. - 5:00 p.m., Monday through Friday
College Station Central Park Office
1000 Krenek Tap Road
College Station, TX 77840

Registration forms must be accompanied by the entry fee. Forms should include: team name; Manager and Assistant Manager's names, addresses, day and night phone numbers.

FEE: **\$175.00 per team**, cash or a check made payable to the City of College Station.

DIVISIONS: Power (6 on 6), Intermediate (6 on 6), Recreation (6 on 6), or Church (6 on 6).

CO-ED: No more than 3 of one sex on the court. Normally 3 men and 3 women play in the game.

LEAGUE FORMAT: 8-game, plus a double elimination tournament. Teams play two matches once a week.

NIGHTS OF PLAY: **Tuesday and Thursday. Play will begin Tuesday, October 5, 2004. Power and Church are played on Thursday and Intermediate and Recreation are played on Tuesday.**

FREE AGENTS: Call the Parks & Recreation Department at 764-3486 to add your name to the list.

COACHES' MEETING: **5:30 p.m., Thursday, September 30, 2004, at the Central Park Pavilion located next to the Parks and Recreation Office in Central Park.** Schedules, roster forms, and general rules will be provided at this meeting. This is a mandatory meeting.

GAME TIMES: 6:15 p.m., 7:15 p.m., 8:15 p.m., 9:15 p.m., and 10:15 p.m.

LOCATION: College Station Middle School on Rock Prairie Road, A&M Consolidated Middle School on Holik Street and Lincoln Center on Holleman Drive.

TOURNAMENT: Tournament play will begin once all teams have completed the regular season.

AWARDS: T-shirts are given for round robin play and for the post-season tournament.

FOR MORE INFO: Call 764-3486, or visit our web page at <http://www.eteamz.com/cspard>

STAFF: Asst. Athletic Supervisor, Patrick Hazlett
Recreation Supervisor, David Hudspeth

SPECIAL SERVICES: *In compliance with A.D.A. Regulations, if you require special services, please contact us at College Station Parks & Recreation Athletics Office at 764-6386.*

COLLEGE STATION ATHLETICS
2004 ADULT CO-ED VOLLEYBALL – SESSION 4
ENTRY FORM

Circle Division: **POWER** **INTERMEDIATE** **RECREATION** **CHURCH**

Team Name: _____

Manager: _____

Mailing Address: _____

City: _____ **State:** _____ **Zip:** _____

Day Phone: _____ **Night Phone:** _____

E-mail Address: _____

Assistant Manager: _____

Day Phone: _____ **Night Phone:** _____

E-mail Address: _____

**LET US KNOW OF ANY OTHER TEAMS FROM OTHER CITY PROGRAMS THAT
YOUR PLAYERS MAY BE ON TO AVOID CONFLICTS IF THEY PLAY ON THE
SAME NIGHT:**

*If mailing in your registration form, do not forget to include the entry fee.
Please do not send cash through the mail.*

